				S		ina Cases	of HIV and AID 30, 2005	S			
	1										
County/	Cumulative	Through	AIDS C		Jan.1-De	21 2004	Cumulative Th		Cases	Jan.1-Dec	31 2004
District	Cases	Rate	Rank	Deaths	Cases	Rate	Cases	Rate	Rank	Cases	Rate
Total*	15,372	366.2		6,665	851	20.3	20,885	497.5		877	20.9
Abbeville	30	114.0	44	10			54	205.3	43		
Aiken	292	196.0	33	155	12	8.1	516	346.4	27	22	14.8
Allendale	43	388.8	12	22			76	687.1	12	7	63.3
Anderson	245	141.2	42	114	17	9.8	389	224.1	42	17	9.8
Bamberg Barnwell	95 96	595.5 410.2	2 11	44	6	37.6	173 160	1,085.0 683.6	2 13	6 6	37.6 25.6
Beaufort	237	174.6	37	106	16	11.8	426	313.9	30	25	18.4
Berkeley	235	157.0	40	104	6	4.0	346	231.2	41		
Calhoun	40	261.7	22	21 743	71	21.7	45	294.4 774.3	37	79	24.2
Charleston Cherokee	1,488 74	455.4 137.6	8 43	32	6	11.2	2,530 107	199.0	6 44	79	24.2
Chester	57	169.8	39	24			101	300.9	34		
Chesterfield	79	182.5	34	40			118	272.6	40		
Clarendon Colleton	157 149	473.5	6	61	14	42.2 20.2	229 239	690.7	11	8 13	24.1 32.8
Darlington	220	376.3 325.6	15 17	68 96	8 16	20.2	350	603.6 517.9	16 18	21	32.8
Dillon	91	290.8	19	44	6	19.2	161	514.6	19		
Dorchester	227	212.1	27	101	14	13.1	331	309.3	31	14	13.1
Edgefield	66	266.2	21	30			191	770.3	7	8	32.3
Fairfield Florence	69 498	285.8 384.0	20 13	25 222	7 27	29.0 20.8	107 915	443.2 705.6	23 10	8 37	33.1 28.5
Georgetown	192	321.1	18	93	10	16.7	301	503.4	20	15	25.1
Greenville	974	242.8	24	479	61	15.2	1,553	387.1	26	65	16.2
Greenwood	143	211.8	29	60	8	11.8	265	392.5	25	19	28.1
Hampton Horry	70 510	328.6 234.4	16 26	27 220	6 31	28.2 14.2	134 981	629.1 450.8	15 22	6 39	28.2 17.9
Jasper	95	448.3	10	42		. 14.2	136	641.7	14		17.5
Kershaw	144	259.5	23	66			233	419.9	24	8	14.4
Lancaster	115	182.1	35	53	8	12.7	174	275.6	39	9	14.3
Laurens Lee	126 78	179.4 380.5	36 14	63 30	. 6	29.3	208 121	296.2 590.2	36 17	. 11	53.7
Lexington	459	198.7	32	186	33	14.3	702	303.8	33	42	18.2
Marion	159	453.2	9	79	15	42.8	260	741.0	8	13	37.1
Marlboro	129	458.3	7	56			201	714.1	9	6	21.3
McCormick Newberry	24 75	236.8 201.6	25 31	7 35	7	18.8	51 127	503.3 341.3	21 28	. 12	32.3
Oconee	66	95.6	46	29		10.0	83	120.2	46		. 02.0
Orangeburg	479	527.7	5	238	38	41.9	824	907.7	3	40	44.1
Pickens	118	104.9	45	52	8	7.1	136	120.9	45		
Richland Saluda	2,334 40	697.5 212.0	1 28	929 15	139	41.5	3,993 56	1,193.0 296.8	1 35	185	55.3
Spartanburg	550	208.2	30	244	33	12.5	833	315.3	29	21	7.9
Sumter	566	534.2	4	249	30	28.3	891	841.0	4	36	34.0
Union	49	169.8	39	20			89	308.4	32		
Williamsburg York	189 285	534.3 155.1	3 41	86 122	13 20	36.8 10.9	286 524	808.5 285.2	5 38	8 29	22.6 15.8
Unknown	26			9			159				
App I	311	128.2	13	143	18	7.4	472	194.6	13	22	9.1
App II App III	1,092 673	212.6 194.0	9 11	531 296	69 41	13.4 11.8	1,689 1,029	328.8 296.6	10 11	70 26	13.6 7.5
Catawba	457	162.9	12	199	32	11.4	799	284.9	12	41	14.6
Edisto	614	503.2	1	303	46	37.7	1,042	854.0	1	47	38.5
Low Country	551	253.0	7	243	34	15.6	935	429.3	7	47	21.6
Lower Sav Palmetto	431 2,937	235.0 468.4	8 2	218 1,175	18 186	9.8 29.7	752 4,929	410.0 786.1	8 2	35 247	19.1 39.4
Pee Dee	1,176	351.0	4	537	70	20.9	2,005	598.4	4	83	24.8
Trident	1,950	334.2	5	948	91	15.6	3,207	549.7	5	98	16.8
Upper Sav	429	196.9	10	185	22	10.1	825	378.7	9	36	16.5
Waccamaw Wateree	891 945	284.9 439.3	6 3	399 406	54 55	17.3 25.6	1,568 1,474	501.3 685.3	6 3	62 63	19.8 29.3
vvaleree	940	439.3	3	400	55	∠5.6	1,414	000.3	3	03	29.3
Out of State	2,889	N/A	N/A	1,073	114	N/A					

Notes:

Data in this quarterly report are provisional. Case rate per 100,000 population based on 2000 census estimates.

Cells with 3 or fewer cases or deaths are set to missing (.).

AIDS cases are included in counts of HIV cases. HIV and AIDS data are categorized by year of diagnosis.

"Out of State AIDS cases are included in "Total" Category.

** Refer to the technical notes for information about the effect of the IDEP

(Interstate Duplication Evaluation Project) on AIDS and HIV case counts.

		S	outh Carol	ina Cases of To		is, Infectio	us Syphilis, Go . 2005	onorrhea, a	nd Chlamy	/dia		
							,					
0		al Syphilis	- 0004		ious Syphi			onorrhea	- 0004		Chlamydia	2004
County/ District	Jan-Sep 2005 Cases	Jan-De Cases	Rate	Jan-Sep 2005 Cases	Jan-De Cases	Rate	Jan-Sep 2005 Cases	Jan-De Cases	Rate	Jan-Sep 2005 Cases	Jan-Dec 2 Cases	Rate
Total*	415	516	12.3	58	110	2.6		9,264	220.7	15,014	19,042	453.6
Abbeville	4	8	30.4	0	4	15.2	25	32	121.6	76	78	296.5
Aiken	12	6	4.0	2	2	1.3	115	228	153.1	490	450	302.1
Allendale	0	4	36.2	0	0	0.0	62	55	497.2	85	117	1058.0
Anderson Bamberg	18 3	89 5	51.3 31.3	1 0	27 0	15.6 0.0	177 60	262 80	151.0 501.5	336 133	488 185	281.2 1160.0
Barnwell	1	2	8.5	0	1	4.3	35	34	145.3	83	133	568.3
Beaufort	3	5	3.7	0	1	0.7	135	139	102.4	380	516	380.2
Berkeley	5	2	1.3	0	0	0.0	128	143	95.5	274	410	273.9
Calhoun Charleston	2 29	0 22	0.0 6.7	0 4	9	0.0 2.8	12 922	16 1,188	104.7 363.6	16 1,761	55 2,083	359.8 637.5
Cherokee	4	2	3.7	0	1	1.9	125	167	310.5	143	238	442.5
Chester	2	1	3.0	0	0	0.0	63	76	226.4	116	151	449.9
Chesterfield	1	5	11.6	0	1	2.3	37	82	189.4	137	189	436.6
Clarendon Colleton	4	3	9.0 7.6	0	1 0	3.0 0.0	66 39	70 56	211.1 141.4	201 126	205 179	618.3 452.1
Darlington	19	10	14.8	0	0	0.0	122	184	272.3	206	303	448.4
Dillon	3	2	6.4	1	0	0.0	89	137	437.9	162	249	795.8
Dorchester	5 2	7	6.5 8.1	0	2 0	1.9 0.0	100 17	123 57	114.9 229.9	323 75	381 86	356.1 346.9
Edgefield Fairfield	5	2	8.3	2	0	0.0	42	71	229.9	75	124	513.6
Florence	18	11	8.5	0	1	0.8	369	388	299.2	634	754	581.4
Georgetown	5	2	3.3	0	0	0.0	99	105	175.6	230	277	463.3
Greenville Greenwood	49 7	52 11	13.0 16.3	8	11 2	2.7 3.0	656 145	822 228	204.9 337.7	1005 267	1,300 344	324.0 509.5
Hampton	2	2	9.4	0	0	0.0	35	329	1545.0	96	393	1845.0
Horry	17	27	12.4	1	2	0.9	367	423	194.4	771	832	382.3
Jasper	1	0	0.0	1	0	0.0	21	34	160.4	92	103	486.0
Kershaw Lancaster	8 5	1 10	1.8 15.8	0	0	0.0	46 77	83 120	149.6 190.1	180 155	203 226	365.8 358.0
Laurens	6	7	10.0	0	2	2.8	62	75	106.8	131	208	296.2
Lee	1	4	19.5	1	0	0.0	66	45	219.5	134	149	726.8
Lexington	13 5	23	10.0	2		3.0 0.0	203 127	146 155	63.2 441.8	648 203	493 268	213.4 763.8
Marion Marlboro	5	1 3	10.7	1	0	0.0	51	91	323.3	117	142	504.5
McCormick	3	0	0.0	0	0	0.0	12	17	167.8	27	39	384.9
Newberry	2	4	10.8	0	0	0.0	33	59	158.6	140	182	489.1
Oconee Orangeburg	2 16	9 14	13.0 15.4	0	3	5.8	21 268	47 317	68.1 349.2	127 589	125 705	181.0 776.6
Pickens	10	8	7.1	0	1	0.9	42	75	66.7	117	134	119.1
Richland	55	81	24.2	15	17	5.1	799	1,004	300.1	2,006	2,223	664.4
Saluda	2	3	15.9	0	0	0.0	10	15	79.5	49	63	333.9
Spartanburg Sumter	14 23	12 23	4.5 21.7	3	7	0.8 6.6	373 186	518 271	196.0 255.8	698 661	1,001 786	378.8 741.9
Union	1	1	3.5	0	0	0.0		36	124.7	109	151	523.2
Williamsburg	4	4	11.3		0	0.0		118	333.6	129	203	573.9
York Unknown	24	23 0	12.5	8	2 0	1.1	166 36	283 260	154.0	410 91	545 573	296.6
UTIKHOWH	0	U	•	0	U		30	200		91	573	•
Арр I	20	98	40.4	1	31	12.8	198	309	127.4	463	613	252.7
App II	50	60	11.7	8	12	2.3		897	174.6		1,434	279.2
App III Catawba	19 31	15 34	4.3 12.1	4 8	3 2	0.9	537 306	721 479	207.9 170.8	950 681	1,390 922	400.7 328.7
Edisto	21	19	15.6	3	3	2.5	340	413	338.5	738	945	774.5
Low Country	10	10	4.6	1	1	0.5	230	558	256.2	694	1,191	546.8
Lower Sav	13	12	6.5	2	3	1.6		317	172.8	658	700	381.6
Palmetto Pee Dee	75 51	110 32	17.5 9.6	19 2	24 2	3.8 0.6	1,077 795	1,280 1,037	204.1 309.5	2,869 1,459	3,022 1,905	482.0 568.5
Trident	39	31	5.3		11	1.9		1,454	249.2	2,358	2,874	492.6
Upper Sav	24	31	14.2	0	8	3.7	271	424	194.6	625	818	375.5
Waccamaw	26	33	10.6	2	2	0.6		646	206.5	1130	1,312	419.5
Wateree	36	31	14.4	4	8	3.7	364	469	218.0	1,176	1,343	624.4

Notes:
Data in this quarterly report are provisional.
Case rate per 100,000 population based on 2000 census estimates.

Using These Tables

			Table 1					
			es per 100,0					
Cumulat	ive Totals, P	revalence Ra	te, Ranked by	y Rate and C	umulative De	aths*		
Incidence Rates,	Diagnosèd Ja	anuary 1 - De	cember 31, 1	999 and Jan	uary 1 - Dece	mber 31, 20	000	
				2004		04 4000		04 0000
Country			gh June 30, 2		Jan. 1 - Dec	-	Jan. 1 - Dec	
County Abbeville	Cases 19	Rate**	Rank	Deaths 10	Cases 4	Rate	Cases #	Rate #
Aiken	253	72.6	46 29	143	15	16.2 11.1	11	7.
Allendale	37	330.0	11	143	5	44.2	#	#
Anderson	189	114.0	42	96	17	10.4	16	9.7
Bambera	86	516.3	2	42	6	36.8	5	30.0
Barnwell	67	285.4	15	35	5	23.0	10	42.6
Beaufort	185	153.0	34	91	15	13.3	16	13.2
Berkeley	189	132.5	37	96	13	9.1	16	11.2
Calhoun	30	197.6	26	18	#	#	#	#
			County ranki	ng by rate				
Cumulative number of cases.			since 1982.	3 1, 111				
					egory, and Se	ex		
	Cases Dia	agnosed Janu e Totals by A	Age Group, E uary - Decem ge Group and	ber 1999 and d Exposure C	d 2000	ex		
Note if AIDS/HIV/STD case. Sout	Cases Dia	agnosed Janu e Totals by A	Age Group, E uary - Decem	ber 1999 and d Exposure C	d 2000	èх		
Sout	Cases Dia Cumulativ	agnosed Janu e Totals by A Cumulative Ma	Age Group, E uary - Decem ge Group and e Through Jui les	ber 1999 and d Exposure C ne 2001	d 2000 ategory	Fema		
	Cases Dia Cumulativ	agnosed Janu e Totals by A Cumulative Ma c. 31, 1999	Age Group, E uary - Decem ge Group and e Through Ju les Jan. 1 - Dec	ber 1999 and d Exposure C ne 2001 c. 31, 2000	d 2000 ategory Jan. 1 - Dec	Fem: . 31, 1999	Jan. 1 - Dec	
Sout Adult/adolescent exposure category***	Cases Dia Cumulativ Jan. 1 - De Cases	agnosed Janu e Totals by A Cumulative Ma c. 31, 1999 %	Age Group, E Jary - Decemi ge Group and e Through Jul les Jan. 1 - Dec Cases	ber 1999 and d Exposure C ne 2001 c. 31, 2000 %	d 2000 ategory Jan. 1 - Dec Cases	Fema	Jan. 1 - Dec Cases	. 31, 2000 %
Sout Adult/adolescent exposure category*** Men who have sex with men	Cases Dia Cumulativ Jan. 1 - De Cases	agnosed Janue Totals by A Cumulative Ma c. 31, 1999 % 34%	Age Group, E uary - Decemi ge Group and e Through Jui les Jan. 1 - Dec Cases	ber 1999 and d Exposure C ne 2001 c. 31, 2000 % 32%	Jan. 1 - Dec Cases	Fem. . 31, 1999 %	Jan. 1 - Dec Cases N/A	%
Sout Adult/adolescent exposure category*** Men who have sex with men Injecting drug use	Jan. 1 - De Cases 226 67	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10%	Age Group, E uary - Decemi ge Group and e Through Jui les Jan. 1 - Dec Cases 193 53	ber 1999 and d Exposure C ne 2001 c. 31, 2000 % 32% 9%	Jan. 1 - Dec Cases N/A	Fem: . 31, 1999	Jan. 1 - Dec Cases N/A 29	%
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs	Jan. 1 - De Cases 226 67	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2%	Age Group, E Jary - Deceming ge Group and e Through Junion les Jan. 1 - Deceming Cases 193 53 9	ber 1999 and d Exposure C ne 2001 c. 31, 2000 % 32% 9% 1%	Jan. 1 - Dec Cases	Fem. . 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A	%
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder	Jan. 1 - Dec Cases 226 67 13	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decemi ge Group and e Through Juri les Jan. 1 - Dec Cases 193 53 9	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder	Jan. 1 - De Cases 226 67	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2%	Age Group, E Jary - Deceming ge Group and e Through Junion les Jan. 1 - Deceming Cases 193 53 9	ber 1999 and d Exposure C ne 2001 c. 31, 2000 % 32% 9% 1%	Jan. 1 - Dec Cases N/A	Fem. . 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact:	Jan. 1 - De Cases 226 67 13	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decem ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149	
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user	Jan. 1 - De Cases 226 67 13 - 149	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decem ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male	Jan. 1 - De Cases 226 67 13 - 149 N/A	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decem ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7	Fema. 31, 1999 % 8%	Dan. 1 - Dec Cases N/A 29 N/A 2 149	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia	Jan. 1 - De Cases 226 67 13 - 149 N/A	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Deceming ge Group and e Through Junion les Jan. 1 - Deceming Cases 193 53 9 - 116 5 N/A	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia Sx w/ transfusion recipient w/HIV	Cases Dia Cumulativ Jan. 1 - Dec Cases 226 67 13 - 149 N/A 2 1	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decemi ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A -	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia	Cases Dia Cumulativ Jan. 1 - Dec Cases 226 67 13 - 149 N/A 2 1	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decem ge Group and e Through Jur les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia Sx w/ transfusion recipient w/HIV Sx w/HIV+ person, risk not specified	Cases Dia Cumulativ Jan. 1 - Dec Cases 226 67 13 - 149 N/A 2 1	e Totals by A Cumulative Ma c. 31, 1999 % 34% 10% 2% 0%	Age Group, E Jary - Decem ge Group and e Through Jur les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A	ber 1999 and Exposure Cone 2001 2. 31, 2000 % 32% 9% 1% 0%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7	Fema. 31, 1999 % 8%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6	% 99 19
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia Sx w/ transfusion recipient w/HIV Sx w/HIV+ person, risk not specified Receipt of blood transfusion/components	Cases Dia Cumulativ Jan. 1 - De Cases 226 67 13 - 149 N/A 2 1 127	agnosed Janue Totals by A Cumulative Mac. 31, 1999 % 34% 10% 2% 0% 23%	Age Group, E Jary - Decem ge Group and e Through Jur les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A - 111	ber 1999 and Exposure Cone 2001 3. 31, 2000 % 32% 9% 1% 0% 19%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7 1 1 157	Fem. 31, 1999 % 8% 62%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6 1 1 -	% 99 19 489
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia Sx w/ transfusion recipient w/HIV	Cases Dia Cumulativ Jan. 1 - Dec Cases 226 67 13 - 149 N/A 2 1 127	agnosed Janue Totals by A Cumulative Mac. 31, 1999 % 34% 10% 2% 0% 23%	Age Group, E Jary - Decemi ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A - 111	ber 1999 and Exposure Cone 2001 3. 31, 2000 % 32% 9% 1% 0% 19%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7 1 1 157	Fem. 31, 1999 % 8% 62% 1%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6 1 1 - 127	99 19 489 19 429
Adult/adolescent exposure category*** Men who have sex with men Injecting drug use Men who have sex with men & inject drugs Hemophilia/coagulation disorder Heterosexual contact: Sx w/ injecting drug user Sx w/ bisexual male Sx w/ person with hemophilia Sx w/ transfusion recipient w/HIV Sx w/HIV+ person, risk not specified Receipt of blood transfusion/components Undetermined	Cases Dia Cumulativ Jan. 1 - Dec Cases 226 67 13 - 149 N/A 2 1 127	agnosed Janue Totals by A Cumulative Mac. 31, 1999 % 34% 10% 2% 0% 23%	Age Group, E Jary - Decemi ge Group and e Through Jun les Jan. 1 - Dec Cases 193 53 9 - 116 5 N/A - 111	ber 1999 and Exposure Cone 2001 3. 31, 2000 % 32% 9% 1% 0% 19% 0% 39%	Jan. 1 - Dec Cases N/A 26 N/A - 192 26 7 1 1 157	Fem. 31, 1999 % 8% 0% 62% 1% 39%	Jan. 1 - Dec Cases N/A 29 N/A 2 149 15 6 1 1 - 127	99 19 489

TECHNICAL NOTES – September 30, 2005

Legal Reporting Requirements in South Carolina

HIV infection and AIDS cases are reportable in South Carolina by law. All physicians, hospitals, laboratories, administrators of health care facilities, charitable or penal institutions, etc., are required to report HIV infections and AIDS cases to DHEC with identifiers (See S.C. Code Ann. Sections 44-29-10, 70, and 80 (Supp. 1989); 24A S.C. Code Ann. Reg. 61-20 (Supp. 1989) and 24A S.C. Code Ann. Reg 61-21 (as amended). All information regarding sexually transmitted diseases including HIV and AIDS, reported to DHEC must be kept strictly confidential (See S.C. Code Ann. Section 44-29-135 (Supp. 1989).

Surveillance and Reporting in South Carolina

Data in this report are provisional. The data are constantly updated to reflect the most accurate statistics. Reporting delays (time between diagnosis and report to DHEC) are as follows: approximately 84% of all AIDS cases are reported within 3 months of diagnosis; approximately 93% are reported within 6 months of diagnosis; about 95% are reported within 9 months diagnosis; approximately 96% are reported within 12 months of diagnosis; and 4% are reported more than 1 year after diagnosis.

Age group tabulations are based on person's age at diagnosis of HIV or AIDS; adult/adolescent cases include persons 13 years and older; pediatric AIDS cases include children under 13 years of age. Pediatric HIV positive children are not included in the HIV data until they are confirmed HIV positive at 18 months of age.

County tabulations are based on person's country of residence in South Carolina at the time of initial diagnosis of AIDS or HIV infection. For statistical purposes, the county data are never updated to reflect the migratory patterns that may occur. AIDS cases that are diagnosed outside of South Carolina are reflected in the out-of-state category. These cases are deemed out-of-state according to the jurisdiction policies set by the National Centers for Disease Control and Prevention (CDC).

Completeness of AIDS case reporting has been assessed in South Carolina. Findings from a validation study of 1999 hospital discharge data indicated that 97% of the inpatient AIDS-related discharges (cases) had been reported to the DHEC HIV/AIDS Surveillance Program ("Improvements in AIDS Case Reporting, South Carolina" <u>JAMA</u> 1991; 265(3):356).

In July of 2001, the CDC sent states an evaluation program to conduct in HARS on the timeliness of HIV and AIDS reports. The results from the project indicated that the South Carolina HIV/AIDS program was well above the standard of 66% of cases reported within six months of diagnosis. The result from the evaluation determined that the timeliness for HIV reporting was 92.7% and AIDS reporting was 87.2% within 6 months. Several factors contribute to these higher percentages:

1) HIV surveillance has been conducted since February 1986;

- 2) Both physicians and laboratories are required to report positive EIA/WB, CD4 T-Lymphocyte counts of <200 or <14%, and detected HIV RNA and positive DNA viral load results, and
- 3) Active surveillance activities are conducted by regional surveillance coordinators assigned to 4 areas throughout the state.

CDC's AIDS Case Definition

As of January 1, 1993, the National Centers for Disease Control and Prevention (CDC) AIDS case definition has been expanded to include the following AIDS - defining conditions in people with HIV infection:

CD4T-lymphocyte count less than 200/ uL or CD4 T-lymphocyte percent of total lymphocytes less than 14%
Pulmonary tuberculosis (TB disease)
Invasive cervical cancer
Recurrent pneumonia, within a 12 month period

According to the Centers for Disease Control and Prevention (CDCP), the expanded HIV classification system and AIDS surveillance case definition is expected to increase the number of reported cases in 1993 by approximately 75%. The immediate increase in case reporting will largely be attributed to the addition of the severe immunosuppression to the definition.

The number of AIDS cases reported in South Carolina during January - March 1993 compared to January - March 1992 increased by 228%. This large increase was mainly attributable to the implementation of the CDC's Expanded HIV Classification system and AIDS surveillance case definition. This increase is also due to the expansion of surveillance efforts throughout South Carolina by the addition of staff referred to as regional surveillance coordinators. These regional surveillance coordinators are located in the 4 largest cities of the state (Charleston, Columbia, Florence, and Greenville) and are responsible for surveillance in the immediate areas surrounding them.

Exposure Categories

A hierarchy of exposure categories designed by the Centers for Disease Control has always been used for surveillance purposes. Persons with more than one reported mode of exposure are classified in the category listed first in the hierarchy, except for men who have sex with other men and inject drugs. They comprise a separate category. In addition, "undetermined" refers to persons whose mode of exposure to HIV is unknown. This includes persons who are currently under investigation, persons who died before exposure history was obtained, persons who are lost to follow-up, or persons who refused to be interviewed. The large numbers of "undetermined" mode of exposure in the HIV data is attributed to the fact that exposure category information is presently only available on persons reported from DHEC clinics. Consequently, this caveat should be taken into consideration when using the HIV exposure category data. In the future, DHEC will be using a combined HIV/AIDS report form designed by the Centers for Disease Control that will allow us to collect mode of exposure for HIV infection in both DHEC clinics and non-DHEC settings.

Rates

Some rates in this report are cumulative rates; they are on a cumulative basis per 100,000 population. The numerators for computing the cumulative rate are based on the cumulative number of AIDS cases or HIV infection by county of residence. The denominators for computing rates are based on estimates of the 2000 census data (Division of Research and Statistical Services, State Data Center, South Carolina Budget and Control Board). Each rate is computed as the cumulative number of cases divided by the current year estimated population, multiplied by 100,000. Incidence rates are also included. The numerators for incidence rates are based on the number of AIDS cases or HIV infection during the year of report. Incidence rates are computed as the number of cases in the report year divided by the current year estimated population, multiplied by 100,000.

AIDS CASE RESIDENCY AND DEDUPLICATION EFFORTS

AIDS and HIV Case Reporting

All states and U.S. territories have some form of HIV/AIDS reporting that incorporates reporting by individual medical care providers and/or laboratories conducting HIV related tests. This national effort enables public health surveillance staff to track the scope of the AIDS epidemic. It also allows the federal government to allocate funds equitably to the states for the care of people with HIV and AIDS who cannot pay for all or part of their treatment.

All states and areas have been reporting AIDS cases since 1986. Because of advances in treatment that have extended the time between HIV infection and a diagnosis of AIDS, states began instituting HIV reporting in 1985 as a way of understanding how the epidemic has changed and the progress of HIV disease. However, HIV case reporting is currently less standardized than AIDS case reporting. Some areas or states have only recently implemented HIV reporting and this reporting is not consistent across all areas. Therefore, AIDS case reports (also called surveillance data) are considered the only nationally representative data source for the epidemic.

Potential for Duplication

The potential for duplication has become more of an issue because of the mobility of our society and also because of the success of treatment for HIV and AIDS. Persons with HIV or AIDS may move for reasons related to their infection, for example, to be near family or friends, to seek social support services, to seek more knowledgeable physicians, to seek experimental drug programs, or because of inability to work due to HIV disease. With the advent and success of highly active antiretroviral therapy (HAART), those persons living relatively healthy lives may move for reasons unrelated to HIV or AIDS – to seek out new job opportunities or simply to fulfill a dream of living in a different place. This mobility increases the challenge of avoiding duplication in counting persons with AIDS across different jurisdictions throughout the US.

To counter the potential problem of duplication, CDC initiated the Interstate **Duplication Evaluation Project (IDEP) in 2002.** This considerable effort compared patient

records in the national database across states in order to identify potential duplicate cases. The following process was used.

- 1. CDC reviewed the national case reports sent to CDC through December 2001 for duplications. Because CDC does not receive names of patients, a match of information consisting of soundex (which is a code for the last name), date of birth, and gender identified potential duplications.
- 2. CDC provided states with a listing of all cases that were potential duplicates from other states. CDC also included additional supporting information such as diagnosis and death dates to assist states in their attempts to determine whether persons were the same or different individuals.
- 3. States contacted each other to compare their patient profiles along with additional information available at the state level that is not reported to CDC.
- 4. Based on their discussions, the states decided whether the cases represented the same person. If they did, the states determined the state of residency at the date of diagnosis.
- 5. The states forwarded these decisions to CDC, which returned them, after processing and quality control, to the states for updating their surveillance databases.

After de-duplication, the numbers of cumulative diagnosed AIDS cases in individual states will most likely decrease, as will the overall national numbers. CDC estimates that the decreases on the national level will be less than 5% of the AIDS cases reported over the entire history of the HIV epidemic.

How has this de-duplication effort affected the states' numbers of AIDS cases? Preliminary data suggest that there are, on average about 300 duplicate cumulative AIDS cases per state, although that ranged from 0 to over 3000 for individual states. This means that, again on average, that there were about 5% duplicate AIDS cases per state, although that ranged from 0 to 10%.

INCREASE IN CASES OF DIAGNOSED CHLAMYDIA

There is a noticeable increase in the number of diagnosed cases of Chlamydia starting in 2004. This is due in part to a new test assay being used that is more sensitive. The new test being used this year (Aptima) has enabled better detection of Chlamydia, and, therefore more cases are being diagnosed that would have been previously undetected. There is also an increase in the number of providers reporting Chlamydia cases in 2004.